PART B - FEE(S) TRANSMITTAL Complete and send this form, together when applicable fee(s), to: Mail Stop ISSUE Commissioner fo Commissioner for Patents JUN 1 9 2006 P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

NSTRUCTIONS: This for appropriate. All further con indicated unless corrected by maintenance fee notification	elow or directed otherwise	smitting the ISSU Patent, advance or in Block 1, by (a	E FEE and I ders and notif) specifying a	a new co	rrespondence address;	and/or (b) indicating a sep	t correspondence address as arate "FEE ADDRESS" for
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of address)					Fee(s) Transmittal. Thi papers. Each additiona	s certificate cannot be used	or domestic mailings of the for any other accompanying ent or formal drawing, must
02292 7590 05/30/2006					Certificate of Mailing or Transmission		
BIRCH STEWAR PO BOX 747 FALLS CHURCH,	•	*	hereby certify that the States Postal Service waddressed to the Mail ransmitted to the USP	is Fee(s) Transmittal is being its sufficient postage for fit Stop ISSUE FEE address TO (571) 273-2885, on the	g deposited with the United st class mail in an envelope above, or being facsimile date indicated below.		
			·	[(Depositor's name)
							(Signature)
				[(Date)
APPLICATION NO.	APPLICATION NO. FILING DATE - FIR			IRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/758,107	01/16/2004	Dae Up Solin			<u> </u>	4577-0107P	4997
TITLE OF INVENTION: C	LIP TYPE LIGHT EMITTE	R					
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PU	BLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	700			\$300	31700 08/30/2006 4 1000,00 SMAU ENTITY	
EXAMINER		ART UNIT		CL	ASS-SUBCLASS		
WARD, JOHN A		2875			362-106000		
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 1 BIRCH, STEWART, KOLASCH & BIRCH LLP				
Change of correspond Address form PTO/SB/12							
"Fee Address" indicat PTO/SB/47; Rev 03-02 of Number is required.							
3. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON T	THE PATENT	Γ (print o	r type)		
PLEASE NOTE: Unless recordation as set forth in	an assignee is identified by 37 CFR 3.11. Completion	elow, no assignee of this form is NO	i a substitute	tor ming	an assignment.		document has been filed for
(A) NAME OF ASSIGN	EE .		(B) RESIDE	NCE: (C	ITY and STATE OR O	COUNTRY)	
Please check the appropriate	assignee category or category	ries (will not be pr	inted on the pa	atent):	☐ Individual ☐ Co	orporation or other private g	roup entity Government
4a. The following fee(s) are	enclosed:	41	o. Payment of	Fee(s):			
☑ Issue Fee			A check in the amount of the fee(s) is enclosed.				
Publication Fee (No small entity discount permitted)			Payment by credit card. Form PTO-2038 is attached.				
Advance Order - # of		The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 02-2448 (enclose an extra copy of this form). IF					
	(from status indicated above		h Applic	ant is no	longer claiming SMA	LL ENTITY status. See 37 (NECESSARY CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature Typed or printed name

Joseph A. Kolasch Date 86/20/2006 NEETERE 2 2000 198 90758107

Reg**ps** at C 2501 22,463 300.00 OP 700.00 OP

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit is the public which is to file (and by the public which

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.